

Division of Health Licensing

County: Hampton

Facility Type: Community Residential Care Facility

| Facility Name Location Street Location City, State Administrator/Phone | County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date | Licensed Units |
|---|---|-------------------|
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| J & T RESIDENTIAL CARE FACILITY 604 WAGON WHEEL RD HAMPTON, SC 29924-5346 FAC.#:803-943-7177 HAMILTON, DA'ASIA S PH#: 803-943-7177 Facility Email: Not on File | Hampton / Sole Proprietorship 604 WAGON WHEEL RD HAMPTON, SC 29924-5346 THELMA S MYERS CRC-1094 / 05/31/2014 | 10 |
|---|--|----|

| | | | |
|--------------------|-------------------|--------------------|---------------|
| Alzheimer Care:Yes | Max # Resident:10 | Alzheimer Unit: No | Max # Beds: 0 |
|--------------------|-------------------|--------------------|---------------|

Certifications:None

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|---|--|----|
| SEVILLE'S RESIDENTIAL CARE FACILITY 109 BENNETT LN HAMPTON, SC 29924-1375 FAC.#:803-943-9131 JENKINS, GENORA W PH#: 803-943-9131 Facility Email: PEPPERFORCE@YAHOO.COM | Hampton / Sole Proprietorship 109 BENNETT LN HAMPTON, SC 29924-1375 GENORA W JENKINS CRC-1178 / 08/31/2014 | 10 |
|---|--|----|

| | | | |
|-------------------|------------------|--------------------|---------------|
| Alzheimer Care:No | Max # Resident:0 | Alzheimer Unit: No | Max # Beds: 0 |
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Certifications:None

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| VARNVILLE COMMUNITY RESIDENCE 266 HAMPTON RD VARNVILLE, SC 29944 FAC.#:803-943-4818 MCQUIRE, ELISE S PH#: 803-943-4818 Facility Email: ELISEMAC@YAHOO.COM | Hampton / PO BOX 128 HAMPTON, SC 29924 HAMPTON COUNTY DISABILITIES AND SPECIAL NEEDS BOARD CRC-1211 / 05/31/2014 | 8 |
|--|--|---|

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|-------------------|------------------|--------------------|---------------|
| Alzheimer Care:No | Max # Resident:0 | Alzheimer Unit: No | Max # Beds: 0 |
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Certifications:None

Totals For Facility/License Type: Community Residential Care Facility

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| Number of Activities/Facilities licensed: <u>3</u> | Number Licensed Units: <u>28</u> |
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County: Hampton

Facility Type: Hospital or Institutional General Infirmary

| Facility Name Location Street Location City, State Administrator/Phone | County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date | Licensed Units |
|---|--|-------------------|
| HAMPTON REGIONAL MEDICAL CENTER 595 W CAROLINA AVE VARNVILLE, SC 29944-4735 FAC.#:803-943-2771 HAMILL, DAVID H PH#: 803-943-2771 Facility Email: JALLEN@HAMPTONREGIONAL.ORG | Hampton / Non-Profit Corporation PO BOX 338 VARNVILLE, SC 29944-0338 HAMPTON REGIONAL MEDICAL CENTER (INC) HTL-0027 / 07/31/2014 | 32 |
| Licensed Beds: General: 32 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0 | | |
| Certifications:Swing Bed Unit(s) | | |

Totals For Facility/License Type:Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 1 Number Licensed Units: 32

County: Hampton

Facility Type: Nursing Home

| Facility Name Location Street Location City, State Administrator/Phone | County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date | Licensed Units |
|--|---|-------------------|
| UNIHEALTH POST ACUTE CARE-LOW COUNTRY 252 LIBERTY AVE S ESTILL, SC 29918 FAC.#:803-625-3852 BRODERICK, ASHLYN PH#: Facility Email: CHONEYCUTT@UHS-PRUITT.COM | Hampton / Ltd. Liability 252 LIBERTY AVE S ESTILL, SC 29918 HERITAGE HEALTHCARE OF ESTILL LLC NCF-0922 / 09/30/2014 | 104 |

Licensed Beds: Nursing Home: 104 Institutional Nursing Home: 0

Alzheimer Care: No Max # Resident: 0 Alzheimer Unit: No Max # Beds: 0

Certifications: None

Totals For Facility/License Type: Nursing HomeNumber of Activities/Facilities licensed: 1 Number Licensed Units: 104

County: Hampton

Facility Type: PSAD Outpatient

| Facility Name | County/Ownership Type | Licensed |
|--|--|----------|
| Location Street | Mailing/Billing Address | Units |
| Location City, State | Licensee | |
| Administrator/Phone | License Nbr/Expiration Date | |
| NEW LIFE CENTER COMMISSION ON ALCOHOL AND OTHER DRUG ABUSE | Hampton / County | 3 |
| 102 GINN ALTMAN AVE STE C | 102 GINN ALTMAN AVE STE C | |
| HAMPTON, SC 29924-3962 FAC.#:803-943-2800 | HAMPTON, SC 29924-3962 | |
| RICKENBAKER, RONALD N PH#: 803-943-2800 | NEW LIFE CENTER COMMISSION ON ALCOHOL AND OTHER DRUG ABUSE-BOARD | |
| Facility Email: NEWLIFEHAMPTON@GMAIL.COM | OTP-0078 / 05/31/2014 | |

Certifications:None

Totals For Facility/License Type: PSAD OutpatientNumber of Activities/Facilities licensed: 1 Number Licensed Units: 3

Division of Health Licensing

County: Hampton

Facility Type: Tattoo Facility

| Facility Name Location Street Location City, State Administrator/Phone | County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date | Licensed Units |
|---|---|-------------------|
| GOT INK?! | Hampton / Sole Proprietorship | 3 |
| 940 ELM ST E | 940 ELM ST E | |
| HAMPTON, SC 29924-2612 FAC.#:803-842-0643 | HAMPTON, SC 29924-2612 | |
| NIX, RICHARD WAYNE PH#: 803-842-0643 | NIX, RICHARD WAYNE | |
| Facility Email: RICHARDNIX2008@YAHOO.COM | TF-0151 / 12/31/2013 | |

Totals For Facility/License Type: Tattoo FacilityNumber of Activities/Facilities licensed: 1 Number Licensed Units: 3Number of Activities/Facilities licensed in county of Hampton # Lics: 7Number Licensed Units : 170

Report Totals

Total Number of Activities/Facilities licensed 7 Total Number Licensed Units: 170